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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 09/162,128 09/29/1998 ABN

88

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY LA	SHEETS DRAWING 13	TOTAL CLAIMS 69	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature 88	Initials			

ADDRESS

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TITLE

~~Apparatus and method for maintaining and/or restoring viability of organs~~

FILING FEE RECEIVED 971	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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